

JUN 21 2005

POSZ LAW GROUP, PLC

ATTORNEYS AT LAW

11850 ROGER BACON DRIVE, SUITE 10
RESTON, VA 20190

DAVID G. POSZ
JAMES E. BARLOW *
BRIAN C. ALTMILLER
ROBERT L. SCOTT, II
CYNTHIA K. NICHOLSON

SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

TEL: (703) 707-9110
FAX: (703) 707-9118
WWW.POSZLAW.COM

* NOT ADMITTED IN VIRGINIA
PRACTICE LIMITED TO FEDERAL PATENT,
TRADEMARK AND COPYRIGHT MATTERS

FACSIMILE TRANSMISSION

Date: June 21, 2005

Pages: 30 (including this page)

From: Cynthia K. Nicholson

To: USPTO

Fax No.: 703-872-9306

Subject: Amendment

Comments:

Applicant: Lee	Serial No.: 09/460,806
Filing Date: 12/15/1999	Atty Dkt.: 113708.123

Title: FEE TRANSACTION SYSTEM AND METHOD FOR INTELLECTUAL PROPERTY ACQUISITION AND/OR MAINTENANCE

Attached please find:

- (1) Transmittal form;
- (2) Petition for Extension of Time (2 months);
- (3) Fee Transmittal form; and
- (4) 26-page Amendment

RECEIVED
OIPE/IAP
JUN 22 2005

****Notice****

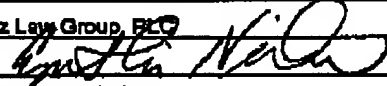
The information contained in this facsimile transmission is intended only for the above-indicated addressee, and may contain privileged and confidential attorney work product or trade secret information. Any dissemination, distribution or copying of any part of this transmission is strictly prohibited. If you have received this transmission in error, please immediately notify the sender, and return the transmission to the sender at the above-indicated address.

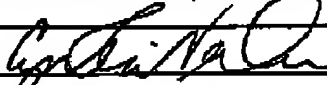
RECEIVED
OIPE/IAP

JUN 22 2005

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	09/460,806
		Filing Date	12/15/1999
		First Named Inventor	Lee
		Art Unit	3629
		Examiner Name	Jonathan P. Ouellette
Total Number of Pages in This Submission		Attorney Docket Number	113708.123

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Poez Law Group, P.C.		
Signature			
Printed name	Cynthia K. Nicholson		
Date	21 June 2005	Reg. No.	36,860

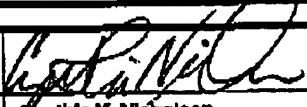
CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Cynthia K. Nicholson	Date	21 June 2005

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		Application Number 09/460,806 Filing Date 12/14/1999 First Named Inventor Lee Examiner Name Jonathan P. Oulette	
<input checked="" type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Art Unit 3629	
TOTAL AMOUNT OF PAYMENT (\$) 225		Attorney Docket No. 113708.123	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number 50-1147 Deposit Account Name: Poss Law Group, PLC	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	
<input type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES <small>Small Entity</small>		SEARCH FEES <small>Small Entity</small>		EXAMINATION FEES <small>Small Entity</small>		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	180	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	
							Small Entity
							Fee (\$)
							225

2. EXCESS CLAIM FEES			
Fee Description			
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent			
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent			
Multiple dependent claims			
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=	
HP = highest number of total claims paid for, if greater than 20			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	
HP = highest number of independent claims paid for, if greater than 3			
3. APPLICATION SIZE FEE			
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (5 for small entity)			
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.10(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
- 100 =	/ 50 =	(round up to a whole number) x	
			Fee Paid (\$)
			225
4. OTHER FEE(S)			
Non-English Specification,		\$130 fee (no small entity discount)	
Other, Petition for Extension (2 months, small entity)			

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	36,880
Name (Print/Type)	Cynthia K. Nicholson	Telephone	(703) 707-9110
		Date	21 June 2005